

11

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51		
2		1					52	1	
3		1					53	1	
4		2					54	1	
5		1					55	1	2
6	1	1					56	1	3
7	1	1					57	1	3
8	1	1					58	1	3
9		1					59	1	
10		1					60	1	
11		1					61	1	
12		1					62	1	
13		1					63	1	3
14		1					64	1	
15		1					65	1	
16		1					66	1	
17		1					67	1	
18		1					68	1	
19		2					69	1	
20		1					70	1	
21		1					71	1	
22		1					72	1	
23		1					73	1	
24		1					74	1	
25		1					75	1	
26		1					76	1	
27		1					77	1	
28		1					78	1	
29		1					79	1	
30		1					80	1	
31		1					81	1	
32		1					82	1	
33		1					83	1	
34		1					84	1	
35		1					85	1	
36		1					86	1	
37		1					87	1	
38		1					88	1	
39		1					89	1	
40		1					90	1	
41		1					91	1	
42		1					92	1	note 3
43		1					93	1	
44		1					94	1	
45		1					95	1	
46		1					96	1	
47		3					97	1	
48		3					98	1	
49		3					99	1	
50		3					100	1	
TOTAL IND.							TOTAL IND.		
TOTAL DEP.							TOTAL DEP.		
TOTAL CLAIMS							TOTAL CLAIMS		